

# PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number  
**109/710 366**

CLAIMS AS FILED (Part I)	
TOP	NUMBER FILED
BASIC FEE (37 CFR 1.16(a))	
TOTAL CLAIMS (37 CFR 1.16(c))	number 20
INDEPENDENT CLAIMS (37 CFR 1.16(b))	number 5
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))	

RATE	FEE
	<b>395</b>
TOTAL	

OTHER THAN SMALL ENTITY	
RATE	FEE
	<b>790</b>
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

**11-10-04**  
**SPC**

CLAIMS AS AMENDED - PART II				
	(Column 1)		(Column 2)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	<b>24</b>	Minus	<b>26</b> = <b>0</b>
	Independent (37 CFR 1.16(b))	<b>4</b>	Minus	<b>5</b> = <b>0</b>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY	
RATE	ADDITIONAL FEE
<b>9</b>	
<b>44</b>	
<b>150</b>	
TOTAL	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
<b>18</b>	
<b>88</b>	
<b>300</b>	
TOTAL	

**12-16-04**

CLAIMS AS AMENDED - PART II				
	(Column 1)		(Column 2)	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	<b>24</b>	Minus	<b>26</b> = <b>0</b>
	Independent (37 CFR 1.16(b))	<b>4</b>	Minus	<b>5</b> = <b>0</b>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY	
RATE	ADDITIONAL FEE
<b>9</b>	
<b>44</b>	
<b>150</b>	
TOTAL	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
<b>18</b>	
<b>88</b>	
<b>300</b>	
TOTAL	

CLAIMS AS AMENDED - PART II				
	(Column 1)		(Column 2)	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))		Minus	
	Independent (37 CFR 1.16(b))		Minus	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY	
RATE	ADDITIONAL FEE
<b>9</b>	
<b>44</b>	
<b>150</b>	
TOTAL	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
<b>18</b>	
<b>88</b>	
<b>300</b>	
TOTAL	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 2.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 5, enter "5".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  
 Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.  
 Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND THESE OR COMPLETED FORMS TO THE SUPPLY CENTER. Assistant Commissioner for  
 Patents, Washington, DC 20231

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